## Best Available Copy

1	PATENT APP	PLICATION Effective	FEE DET December	<b>ERMINATIOI</b> 29, 1999	N RECORD	)		09/	15	1690	8	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
OR			NUMBER FILED		NUMBER EXTRA		TE	FEE		RATE	FEE	
BASIC FEE								345.00	OR		690.00	
OTAL CLAIMS		20	2 o minus 20=		•		9=		OR	X\$18=		
IDEPENDENT CLAIMS		<del> </del>	minus 3	= · /		X	39=		OR	X78=	78	
MULTIPLE DEPENDENT CLAIM PRESENT +130=						20-		OR	+260=			
If the difference in column 1 is less than zero, enter "0" in column 2							TAL		OR	TOTAL	168	
						10	, ,		10	OTHER 1	THAN	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SA	AALL I	NTITY	OR	SMALLE		
¥ -	A	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RAȚE	ADDI- TIONAL FEE	
AMENDMENT		AMENDMENT	Minus	PAID FOR		x	\$ 9=		OR	X\$18=		
	Total • Independent •	20	Minus	<i>y</i>	-	+	(39=		OR	X78=	2.	
ĕ	FIRST PRESENT	FATION OF MU	LTIPLE DEP	ENDENT CLAIM					1	+260=		
1					٠.		130= TOTAL	· .	OR	TOTAL		
							IT. FEE	L	JOR	ADDIT. FEE		
		(Column 1)	Marines ment feet se	(Column 2)	(Column 3)	_		ADDI-	1		ADDI-	
NTB		CLAIMS REMAINING AFTER AMENDMENT	X * 0A	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE	
OME	Total	35	Minus	20	=15	)	<b>(\$ 9=</b>		OR	X\$18=	270	
AMENDMENT B	Independent	3	Minus	···· <i>\( \psi \)</i>	=/	7	K39=		OR	X186	86	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						130=	,	OR			
	:	•				نــا	TOTAL		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)					AD	DIT. FEE			ADDIT FEE		
O IN	The second second	CLAIMS REMAINING . AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY & PAID FOR	PRESENT	·හි බු	RATE	ADDI- TIONAL FEE	3 757	RATE	ADDI- TIONAL FEE	
AMENDMENT		ا د.	Minus	. 35	=	:	X\$ 9=		OF	X\$18=		
EN EN	Independent	· 4	Minus	6			X39=		OF	· X78=		
¥		NTATION OF M	ULTIPLE DE	PENDENT CLAIM		I <del> </del> ⊢		1	7			
Γ				on 2 write 40° in a	sturan 3.		+130= TOTA		OF	YOTAL		
l :	If the entry in colum	nn 1 is less than t ther Previously F	the entry in colu Paid For IN THI	mn 2, write "0" in $\propto$ S SPACE is less th	an 20, enter 20.	. AD	DIT. FE		OF	ADDIT. FEE	:	

FORM PTO-875 (Rev. 12/99)

**Application or Docket Number** 

<sup>&</sup>quot;If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

ADDIT. FEE

OR

ADDIT.

Total

OR

TOTAL

ADDIT. FEE

OR

ADDIT.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.